



Dear Tissue Bank Director:

Attached below is your tissue bank license.  
Your license is void after the expiration date.

NOTE: Applications for renewal of license must be filed with the department **not less than 30 days** prior to its expiration date and shall be accompanied by the annual renewal fee. (CA H&S Code §1639.2)

**AMNIOX MEDICAL, INC. - DORAL**  
**7300 NW 19TH ST STE 700**  
**ATTN: DELHY ARIAS, REG AFFAIRS MANAGER**  
**MIAMI FL 33126-1233**

**FORFEITURE OF LICENSE**

A Tissue Bank license shall be forfeited by operation of law prior to its expiration date when one of the following occurs:

- (1) The tissue bank is sold or otherwise transferred.
- (2) The license is surrendered to the state department.

**QUESTIONS AND INFORMATION:**

If you have any questions, please write to:

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
Laboratory Field Services, Tissue Bank Section  
850 Marina Bay Parkway, Building P, 1<sup>st</sup> Floor  
Richmond, CA 94804-6403

Internet Address: [www.cdph.ca.gov/LFS](http://www.cdph.ca.gov/LFS)

Thank you for your cooperation.

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STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

**TISSUE BANK LICENSE**

In accordance with Division 2, Chapter 4.1, of the Health and Safety Code, the entity named below is hereby licensed to engage in the listed tissue bank operation(s) at the indicated facility address.

**AMNIOX MEDICAL, INC. - DORAL**  
**8305 NW 27TH ST., STE 101**  
**DORAL FL 33122**

**OWNER(S):**  
AMNIOX MEDICAL, INC.  
TISSUETECH, INC

**DIRECTOR(S):**  
FRANK YOUNG MD

**TISSUE BANK ID Number: CTB 00082060**

**Issuance Date: March 9, 2019**

**Expiration Date: March 7, 2020**

Robert J. Thomas, Acting Branch Chief  
Laboratory Field Services